

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | 09/16/99 |
| FORMALITY REVIEW | PIC | | 3-31-99 |

INDEX OF CLAIMS

BEST AVAILABLE COPY

✓ Rejected
 = Allowed
 (Through numeral) Canceled
 + Restricted
 N Non-elected
 i Interference
 A Appeal
 O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|----------|
| 1 | ✓ | ✓ | 7 Dec 99 |
| 2 | ✓ | ✓ | 7 Dec 99 |
| 3 | ✓ | ✓ | 7 Dec 99 |
| 4 | ✓ | ✓ | 7 Dec 99 |
| 5 | ✓ | ✓ | 7 Dec 99 |
| 6 | ✓ | ✓ | 7 Dec 99 |
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| 13 | ✓ | ✓ | 7 Dec 99 |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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